

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		9-1-99
O.I.P.E. CLASSIFIER			11/9-7-99
FORMALITY REVIEW		61001	9/10/23

INDEX OF CLAIMS

..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral) ..... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Date
1	2/1/99
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Claim	Date
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Claim	Date
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SEE AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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